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\*\* CONTINUING DATA \*\*\*\*\*

None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None

*[Signature]* 02/27/2006

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/11/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>E.E.</i> Initials			

## ADDRESS

21186

## TITLE

Channel estimation feedback in an orthogonal frequency division multiplexing system or the like

<b>FILING FEE RECEIVED</b> 1384	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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